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Typewritten Full Name
of Second Joint inventor:

Ichiro		Yamashita
Given Name	Middle Initial	Family Name

**Inventor's Signature:

Ichiro Yamashita

**Date of Signature:

11 / 13 / 2000

Residence:

Nakai-machi	Kanagawa	Japan
City	State of Province	Country

Citizenship:

Japan

Post Office Address:

(Insert Complete mailing
address, including country)

c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi,
Ashigarakami-gun, Kanagawa, Japan

Typewritten Full Name
of Third Joint inventor:

Shigehisa		Kawabe
Given Name	Middle Initial	Family Name

**Inventor's Signature:

Shigehisa Kawabe

**Date of Signature:

11 / 13 / 2000

Residence:

Nakai-machi	Kanagawa	Japan
City	State of Province	Country

Citizenship:

Japan

Post Office Address:

(Insert Complete mailing
address, including country)

c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi,
Ashigarakami-gun, Kanagawa, Japan

Typewritten Full Name
of Fourth Joint inventor:

Given Name	Middle Initial	Family Name

**Inventor's Signature:

**Date of Signature:

Residence:

City	State of Province	Country

Citizenship:

Post Office Address:

(Insert Complete mailing
address, including country)

Typewritten Full Name
of Fifth Joint inventor:

Given Name	Middle Initial	Family Name

**Inventor's Signature:

**Date of Signature:

Residence:

City	State of Province	Country

Citizenship:

Post Office Address:

(Insert Complete mailing
address, including country)

**Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.